

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly Bulletin

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GUY P. JONES
EDITOR

Migration of Indigent Tuberculous Is Serious Problem

The migration to California of indigent individuals who suffer from tuberculosis provides an acute problem in many counties of the state. Colorado, Texas, New Mexico and Arizona have encountered the same problem over a long period of years and now Washington, Oregon and other northwestern states are beginning to suffer from this type of migration. It is, of course, unfair that any county, east or west, should be forced to care for indigents who are not bona fide residents of that county. Health officers of other states and other cities are doing considerable to keep their indigent tuberculous at home, but there are large groups of such persons over whom no control can be exercised. The National Tuberculosis Association has made a study of the problem and has carried on an educational campaign among eastern physicians and clinics in an effort to stem the tide of this undesirable migration.

Mrs. Edythe Tate Thompson, Chief of the Bureau of Tuberculosis of the California State Department of Public Health has been active in her efforts to curtail this flow of indigents and thus relieve California counties of the onerous burdens associated with their care. The following graphic account of the problem as it exists in California was written by Mrs. Thompson:

"Migration to California, especially in the south, is at present our most serious problem because there can be no control of this group. They arrive in second or third hand automobiles, stopping en route in the beet fields in Colorado, the cotton fields in Arizona and finally into California. These people have no legal residences, in fact, many of them pride themselves on the

fact that they have no home, migrating in this state from Imperial to the Arizona line, wherever there is seasonal labor. They constitute a health problem which makes that of the casual laborer fade into oblivion, because nearly always there are one or two members in the migratory group who have tuberculosis. If they do not have children in their own immediate circle there are always in these camps plenty of children of other migrants to infect, and the vicious circle grows larger and larger; health ordinances, and state laws, are defied by them. Invariably they need aid as winter comes on and the community pays and pays for the lack of control of these people.

Other seasonal labor problems among the Filipinos and Mexicans present themselves, partly social and economic, but always with the balance far on the health side. We have and will continue our agitation for an adequate physical examination of Mexican laborers and their families before entry to this country. We have and will continue to urge deportation of all aliens who have entered this country and are spreading disease wherever they go. Our compulsory education law means that children of these families must be in school many hours in close contact with other children, frequently wearing clothes that may have been placed on the bed of some sick person all night, spreading communicable disease with often its serious aftermath of complications until it would appear that people born and raised here do not have an even break with those who come in. One continues to have respect for the efforts made to suppress the boll weevil; the damages done by the boll weevil can not be of as great lasting damage as that done by the tubercle bacillus. No doubt some day something drastic will be done to compel migratory workers handling food to present a clean bill of health.

Last winter there was reported by a neighbor, the case of a family of four little children, the youngest a six-weeks-old baby, the mother in the last stages of tuberculosis. We finally learned that they had come from Nebraska and that the mother had some relatives in Oregon. We tried to make them see that the Nebraska State Sanatorium would be obliged to care for her, but they refused to listen; finally on one of the coldest days a neighbor telephoned again. We reached the local nurse who telephoned that she had found the man fixing the old car, an open one, and that they were starting for Oregon by the way of Salt Lake. The baby was so ill we felt positive that it could not survive the trip. We had the nurse give the man such directions as were necessary when he reached Nevada, as to the

location of the nearest physicians on the route they were traveling. We need legislation to control these migratory people who may be an asset as far as the disposal of third and fourth hand automobiles are concerned, but that is all.

In Fresno last winter a family from Minnesota arrived with a very sick father in the last stages of tuberculosis. The family were found in a deserted shack without a floor. The man, regardless of his lack of residence, *had* to be admitted to the tuberculosis ward at the county hospital. The welfare department suggested that the old car without a top be sold and the family returned to Minnesota. One bitterly cold night while the night nurse was in the other part of the building, the man disappeared. A search the next day revealed the shack deserted. We tried to trace them, but never have found them. Yet Minnesota has one of the best organized programs in the United States against tuberculosis, but they had failed, through no fault of their own, to reach these people, to let them know that climate is only one factor in the cure of tuberculosis.

Last year from an eastern city, a girl, barely eighteen, with a year and a half old infant and a two months baby arrived in California because she had been advised to come west. So terrible were the entire circumstances connected with her arrival, too harrowing to relate, that the local agencies had to board the children in a home and send the mother to the hospital. The Bureau sent a series of telegrams to the community where she formerly lived advising them that as soon as she could travel the Health Department would have to send an attendant to take her and the two babies home, which they did.

**IF TRAVELING FOR HEALTH
TAKE NOTICE**

Tuberculosis demands REST, FOOD, FRESH AIR and PEACE OF MIND. This may not mean a change of climate. California has NO public institutions with FREE CARE for NONRESIDENTS.

With funds to live for a year, COME, but do not rely on finding light work for support.

The State Board of Health WARNS YOU, because it wishes to spare you homesickness and suffering from financial strain.

**BUREAU OF TUBERCULOSIS
CALIFORNIA STATE BOARD OF HEALTH**

This poster is distributed every fall over the eastern and middle western states.

We simply can not, when we know it, permit any place to subject a human being to the cruelty this girl had placed upon her, and every time we have a case referred to us where they have thought all they had to do was to arrive and be taken care of, we have attempted and with few exceptions have succeeded in returning these people to their legal residence.

We still have the poor old casual laborer who tells you sadly and truthfully, not realizing the pathos of it all, "Well, lady, I ain't exactly got what probably you'd call a legal residence, but I'll promise you I'll go to work again just as soon as I can get a little strength," then you tell him you don't want that promise but one that he won't try to work again until he is much better, it is interesting to see how relieved they are that they do not have to move on.

To the credit of many of our counties which have been dependent on the casual labor for their own comfort and success, we are glad to say that the matter of residence is never pressed to the point where we can not find a bed for these old men."

NEVADA IS IN BIRTH REGISTRATION AREA

The recent admission of Nevada to the United States birth-registration area leaves only three states—New Mexico, South Dakota and Texas—where it is estimated that registration of births is not at least 90 per cent complete, which is the requirement for admission to that area.

POMONA STUDENT WINS GORGAS INSTITUTE PRIZE

The Gorgas Memorial Institute of Tropical and Preventive Medicine, Washington, D. C., recently offered national and state prizes for the best essays on The Life and Achievements of William Crawford Gorgas and Their Relation to Our Health. The contest was open to junior and senior high school students. The winner of the California state prize is Miss Dorothy Coon of the Pomona High School. The California judges were Dr. Walter M. Dickie, Chairman, Director of the State Department of Public Health; Mr. Vierling Kersey, State Superintendent of Education; and the Honorable Florence P. Kahn, of San Francisco, United States Representative. The national prize was awarded to Gertrude Carter Stockard of Mountainburg, Arkansas. The national judges were William J. Cooper, United States Commissioner of Education; Surgeon General Hugh S. Cumming of the United States Public Health Service; and Dr. Franklin H. Martin, Chicago, President of the American College of Surgeons. President Hoover, on May 23, presented the prize to the national winner of the contest.

The competition served to draw attention to the public health achievements of Gorgas and also served to draw attention to the objects of the Gorgas Memorial Institute, which are summarized as follows:

1. Eliminate unnecessary illness.
2. Prolong life, make it healthier, more productive, and enjoyable.
3. Check many diseases before they reach the incurable state.
4. Eradicate tropical diseases, open up territories of unlimited wealth and add enormously to the world's assets.
5. Eradicate pestiferous and disease-bearing mosquitoes. (Malaria alone exacts an annual toll of \$100,000,000.)
6. Build up the 25,000,000 youths and adults in the United States now physically below par.
7. Lay the foundation for healthier future generations.
8. Have every individual submit to a periodic health examination by his family physician, who should be the custodian of health.
9. Prevent disease, and thereby—
 - a. Relieve the nation of \$1,500,000,000 of its annual sick bill.
 - b. Prevent the present annual loss of 350,000,000 hours of time caused by preventable illness of 42,000,000 employees.

c. Save the \$3,000,000,000 lost annually through reduced earning power.

d. Save 750,000 lives annually.

10. Bring about a liaison between the public and the scientific medical and dental professions, the real health authorities.

11. Free all the world from preventable disease, to which purpose the life of Gorgas was consecrated.

INTERCHAMBER HEALTH CONSERVATION CONTEST ANNOUNCED

The Committee on Administrative Practice of the American Public Health Association announces an unusual contest which is of interest to all health officers. A formal announcement setting forth the details of the contest and the nature of the competition will be sent soon to all health officers and to the secretaries of chambers of commerce throughout the United States. Following is the preliminary announcement as issued by the committee:

"An Interchamber Health Conservation Contest is soon to be launched by the Chamber of Commerce of the United States, similar in form to contests heretofore carried on by the Chamber in Fire Prevention.

The primary object of this contest is to assist in reducing economic losses in the United States due to unnecessary illness and death, by means of activities carried on through the leadership of health committees of local chambers of commerce in cooperation with official public health agencies.

The Chamber recognizes the fact that this is a project which definitely concerns the health officer and has asked the American Public Health Association through its Committee on Administrative Practice to act as its technical adviser in planning the contest program. Provision has also been made for rendering through the Association, on request of the local health officer, a limited amount of consultant service without cost to cities entering the contest.

A formal announcement setting forth the details of the contest and the nature of the competition will be sent soon to all city and state health officers and to secretaries of chambers of commerce in the United States."

SEWAGE AND WATER APPLICATIONS PENDING ACTION BY HEALTH BOARD

The following applications for permit are pending before the State Board of Health, final action to be taken at the July meeting of the Board.

Sewage.

ALTURAS: Application for permit to dispose of settled sewage on about eleven acres of land, with overflow into Pit River at the junction of North and South forks.

CALISTOGA: Application for permit to dispose of disinfected stable effluent into Napa River.

ESCONDIDO: Application for permit to build an activated sludge plant and dispose of chlorinated effluent into Escondido Creek.

NEEDLES, SANTA FE RY. CO: Application for permit to build an Imhoff tank and dispose of chlorinated effluent into Colorado River.

Water.

VISALIA, CALIFORNIA WATER SERVICE CORPORATION: Application for permit to supply water from Well No. 1.

MORE THAN NINE MILLION CASES OF PRODUCTS PACKED UNDER STATE SUPERVISION

The total number of cases of canned goods packed under the supervision of the State Department of Public Health during the season beginning July 1, 1928, is 8,835,000 cases.

The products under regulation are sardines, tuna, spinach, olives, asparagus, vegetable salad, string beans and fish products. Tomatoes and tomato products are also packed under the supervision of the State Department of Public Health. Since these California products have been processed according to the scientific regulations developed and enforced by the State Department of Public Health no cases of botulism have occurred in any of these commercially packed products. The canning industry of the United States is looking toward California as an example in the proper regulation of the canning business from the standpoint of public health.

CALIFORNIA HEALTH OFFICERS TO MEET IN OAKLAND

The health officers of California will meet as usual in their annual meeting, as the Health Officers Section of the League of California Municipalities, in Oakland, October 6 to 11. Oakland is well equipped to entertain delegates to this meeting and plans are under way which will provide an unusually interesting meeting for the health officers of the state.

He sleeps well who knows not that he sleeps ill.

—Maxim.

MORBIDITY*

Diphtheria.

42 cases of diphtheria have been reported, as follows: Berkeley 2, Oakland 2, Kern County 1, Kings County 1, Los Angeles County 6, Glendale 1, Los Angeles 13, Pasadena 1, Whittier 1, Hawthorne 1, San Rafael 1, Orange County 1, Santa Ana 1, Riverside 1, Oceanside 1, San Diego 1, San Francisco 4, Stockton 1, Redwood City 1, Santa Clara County 1.

Scarlet Fever.

437 cases of scarlet fever have been reported, as follows: Alameda County 2, Berkeley 3, Hayward 1, Oakland 60, Contra Costa County 5, Pittsburg 1, Fresno County 21, Fresno 7, Sanger 1, Bishop 4, Kern County 10, Bakersfield 5, Lassen County 3, Los Angeles County 38, Alhambra 1, Beverly Hills 2, Burbank 1, Culver City 1, Glendale 3, Huntington Park 5, Long Beach 11, Los Angeles 42, Pasadena 1, Pomona 1, Redondo Beach 1, San Fernando 1, Santa Monica 2, South Gate 3, Monterey Park 1, Signal Hill 3, Bell 4, Madera County 5, Merced County 2, Merced 4, Modoc County 1, Monterey County 3, Salinas 4, Nevada City 2, Orange County 1, Fullerton 1, Santa Ana 1, Roseville 1, Sacramento 13, San Bernardino County 9, San Benito County 1, San Diego County 2, San Diego 15, San Francisco 48, San Joaquin County 4, Manteca 1, Stockton 14, Paso Robles 1, San Mateo County 6,

* From reports received on June 10th and 11th, for the week ending June 8th.

Daly City 1, Santa Maria 4, Santa Clara County 8, Los Gatos 1, Palo Alto 1, San Jose 10, Santa Clara 1, Sunnyvale 2, Santa Cruz 1, Shasta County 5, Sonoma County 2, Healdsburg 1, Petaluma 5, Red Bluff 1, Tulare County 4, Porterville 2, Sonora 2, Yolo County 1, Yuba County 2.

Measles.

112 cases of measles have been reported, as follows: Alameda 1, Oakland 7, San Leandro 4, Fresno County 3, Fresno 1, Lassen County 2, Los Angeles County 3, Beverly Hills 1, Burbank 16, Glendale 12, Huntington Park 3, Long Beach 1, Los Angeles 29, South Gate 2, Orange 1, Riverside 1, Sacramento 9, San Diego 8, San Francisco 5, San Jose 2, Shasta County 1.

Smallpox.

27 cases of smallpox have been reported, as follows: Alameda County 2, Berkeley 6, Fresno County 1, Eureka 1, Los Angeles County 4, Long Beach 1, Los Angeles 1, Salinas 2, Riverside 2, Colton 1, San Jose 1, Shasta County 2, Tulare County 1, Visalia 2.

Typhoid Fever.

8 cases of typhoid fever have been reported, as follows: San Leandro 1, Fresno County 1, Manhattan 1, Los Angeles 1, San Francisco 2, Santa Clara County 1, California 1.**

Whooping Cough.

233 cases of whooping cough have been reported, as follows: Alameda 1, Berkeley 7, Oakland 12, San Leandro 13, Fresno 4, Kern County 2, Hanford 2, Los Angeles County 29, Beverly Hills 3, Burbank 1, Claremont 1, Glendale 3, Glendora 2, Huntington Park 3, Long Beach 1, Los Angeles 32, Monrovia 2,

Pasadena 8, San Gabriel 2, Whittier 4, Madera County 1, San Rafael 2, Merced County 1, Orange County 2, Santa Ana 4, La Habra 7, Tustin 2, Lincoln 7, Riverside County 4, Riverside 5, Sacramento 7, San Bernardino County 1, San Diego County 2, San Diego 6, San Francisco 21, San Joaquin County 3, Stockton 3, San Luis Obispo 1, Santa Barbara County 2, Santa Clara County 6, Palo Alto 10, Santa Cruz 4.

Meningitis (Epidemic).

11 cases of epidemic meningitis have been reported, as follows: Oakland 3, Los Angeles 1, Monterey County 3, Sacramento 2, San Diego 1, California 1.**

Poliomyelitis.

3 cases of poliomyelitis have been reported, as follows: Los Angeles 1, San Gabriel 1, Shasta County 1.

Encephalitis (Epidemic).

1 case of epidemic encephalitis has been reported from San Francisco.

Rocky Mountain Spotted Fever.

3 cases of Rocky Mountain spotted fever have been reported from Modoc County.

Undulant Fever.

1 case of undulant fever has been reported from Los Angeles.


Malaria.

1 case of malaria has been reported from Marysville.

** Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1929				1928			
	Week ending			Reports for week ending June 8 received by June 11	Week ending			Reports for week ending June 9 received by June 12
	May 18	May 25	June 1		May 19	May 26	June 2	
Actinomycosis.....	0	0	0	0	0	0	1	0
Beri-Beri.....	0	0	0	0	0	0	1	0
Chickenpox.....	615	497	433	536	652	592	507	418
Coccidioidal granuloma..	1	2	2	0	0	0	0	0
Diphtheria.....	52	55	59	42	105	87	79	76
Dysentery (amoebic).....	7	3	1	0	2	0	0	2
Dysentery (bacillary).....	3	0	0	1	0	2	3	1
Encephalitis (epidemic) ..	0	2	0	1	3	0	0	2
Erysipelas.....	16	21	23	23	15	9	14	14
Food poisoning.....	1	0	6	0	0	4	0	4
German measles.....	38	31	33	23	343	261	251	203
Gonococcus infection.....	100	95	56	87	85	84	86	111
Hookworm.....	2	0	0	0	0	0	0	0
Influenza.....	57	34	18	24	43	55	30	34
Jaundice (epidemic).....	0	0	0	0	0	0	1	0
Leprosy.....	1	0	0	0	0	1	0	0
Malaria.....	5	1	1	1	2	0	0	1
Measles.....	132	148	142	112	124	97	92	71
Meningitis (epidemic)....	20	23	20	11	6	3	3	3
Mumps.....	695	638	439	424	314	329	345	228
Ophthalmia neonatorum..	0	1	1	0	0	0	1	1
Paratyphoid fever.....	0	0	0	0	0	1	0	1
Pellagra.....	1	2	0	1	2	1	2	4
Pneumonia (lobar).....	50	49	43	54	45	42	34	34
Poliomyelitis.....	5	3	3	3	4	2	7	6
Rabies (animal).....	12	17	17	14	9	18	15	7
Rocky Mt spotted fever..	4	0	0	3	0	0	2	0
Scarlet fever.....	407	459	338	437	160	167	160	126
Smallpox.....	50	67	37	27	30	13	36	9
Syphilis.....	120	178	91	118	186	111	90	174
Tetanus.....	0	2	1	2	2	2	3	2
Trachoma.....	3	4	0	0	3	1	2	2
Tularemia.....	1	1	0	0	0	0	0	1
Tuberculosis.....	235	257	170	203	200	196	165	247
Typhoid fever.....	9	7	7	8	18	16	15	13
Undulant fever.....	0	0	2	1	0	0	0	0
Whooping cough.....	342	341	255	233	362	286	236	313
Totals.....	2984	2938	2198	2389	2715	2380	2181	2108


Rocky Mountain spotted fever is appearing.

↑ ↑ ↑
Epidemic meningitis seems to be declining.

↑ ↑ ↑
Typhoid fever showing a lower level than this time last year.

↑ ↑ ↑
Chickenpox, mumps, scarlet fever and whooping cough continue in their high incidence.